

# Hope and Hurt of Kashmiri Healthcare

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It has been argued in a recent editorial in the *BMJ* that recent developments in Kashmir may cause problems for welfare and healthcare provisions. However, contrary to such claims, in my view, the recent political changes are not likely to have any effect on the healthcare and well-being of Kashmiris. The Indian parliament approved the complete integration of Kashmir with rest of India to end 70 years of its alienation from the national mainstream. Article 370 of the Indian constitution was temporarily installed in 1947, at the ceding of the semi-autonomous Kashmir state to the Indian Union,<sup>1</sup> in order to ensure protection of the native population and their Muslim culture, similar to a few other Indian states. On the other hand, Article 370 provided an opportunity to anti-national forces, particularly those aligned to the bordering country, for the cultural alienation of local people from India. Although the good and bad aspects of Article 370 continue to be debated, but the Indian government felt the need to resolve the problems caused by such alienation of the local people from India, and curb the extent to which this fostered groups that resort to terrorism. Most agree that among other issues, Article 370 promoted discriminatory practices of Muslim men such as annulling marriage by *Triple Talaq*, money laundering by terrorist sympathizers, and inequitable inheritance of property by local women married to non-Kashmiri spouses. This was due to the inapplicability of Indian secular laws which guaranteed women's rights and allowed for financial audit of state expenditures. Nevertheless, regardless of the political debate and contrary to the views expressed in *BMJ*'s editorial<sup>7</sup> in which concerns were raised about deteriorating healthcare access, revocation of Article 370 will bring a positive change in health infrastructure in Kashmir. The misprojected mental health problems are nothing new in Kashmir and are part of continued stress faced by local men and women living there.<sup>2–4</sup> The recent constitutional amendment is set to empower Kashmir with federally administered free healthcare facilities, obviating the need of Kashmiris to travel up to 24 hrs, often over mountainous terrain, to seek treatment at the Post Graduate Institute of Medical Education and Research, Chandigarh. The revoking of Kashmir's autonomy will ensure equitable access to national resources including the free health and wellness scheme "Ayushman Bharat," in tandem with implementation of other Indian laws like Right to Information (RTI) and the abolition of *Triple Talaq*. This nationally funded health scheme will provide free treatment of up to Rs 500,000 for each Kashmiri household, besides access to government wellness centers. Because the Indian government has revoked Article 370, the new position will result in increased investments in state's health infrastructure. As part of the scheme, the wellness

centers will be built in each district along with more hospitals and medical institutes. Hence, there is hope that anxiety from cross-border Islamic terrorism and prevailing gender discriminatory laws<sup>5</sup> will be replaced by progress and peaceful co-existence. Therefore, some authors wrongly argue that there is atmosphere of uncertainty which may continue to harm the patients.<sup>6,7</sup> The Indian health and wellness scheme is poised to promote mental wellness among Kashmiris in the manner it has benefitted the 3.5 million Indians who have already availed of this popular scheme. The Kashmir police is geared to ensure not only the access to healthcare but also the voting rights of the Kashmiri people and affirmative action for other minorities. This includes the mental wellness of Pandit communities who had undergone ethnic cleansing at the hands of jihadi forces and will return back to their abandoned Kashmiri homes. Such healthcare model will likely be a role model for the bordering Pakistan Occupied Kashmir.<sup>8</sup>

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